

CLAIMS ONLY

Application Number

09/410, 800

Filing Date

10/1/99

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	4		4		4	
Total Depend	16		16		16	
Total Claims	20		20		20	
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